

Best Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
Q.C.			1/21/00
JD	Rep		7/2/11-0
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		69300	3/23

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
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Form PTO-436  
(Rev. 5/99)

Claim	Final	Original
1	✓	
2	✓	
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40	✓	✓
41	✓	✓
42	✓	✓
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45	✓	✓
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Claim	Final	Original	Date
1	✓		1/21/00
2	✓		1/21/00
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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